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Express Mail Label No.: I 5673190US Date of Deposit: February 18, 2006

ttorney Docket No

Attorney Docket No.: 18519-001 (EPFL-1)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FIRST-NAMED INVENTOR OR

Francois Spertini

APPLICATION IDENTIFIER:

FOR:

NOVEL BEE VENOM POLYPEPTIDES AND METHODS OF USE

THEREOF

Box PATENT APPLICATION Assistant Commissioner for Patents Washington, D.C. 20231

REQUEST FOR FILING A NEW NONPROVISIONAL APPLICATION UNDER 37 C.F.R. §1.53(b)

	1.	This is	s a request for filing a new nonprovisional application under 37 C.F.R. §1.53(b).						
Unsigned Signed Information Disclosure Statement (IDS) Copy of IDS and PTO-1449 (pages) Copies of references cited S. Assignment Papers Recordation Form Cover Sheet (PTO-1595) Assignment Document 6. Statement Claiming Small Entity Status Claiming Small Entity As Independent Inventor (37 C.F.R. §§1.9(f) & 1.27(b)). Claiming Small Entity As Small Business Concern (37 C.F.R. §§1.9(f) & 1.27(c)).	2.		Specifi	cation (30 pages); Claims (4 pages); Abstract (1 page); and gs: 1 sheets; FIGS. 1. Formal					
Copy of IDS and PTO-1449 (pages) Copies of references cited 5.	3.		Declara	Unsigned					
Recordation Form Cover Sheet (PTO-1595) Assignment Document 6. Statement Claiming Small Entity Status Claiming Small Entity As Independent Inventor (37 C.F.R. §§1.9(f) & 1.27(b)). Claiming Small Entity As Small Business Concern (37 C.F.R. §§1.9(f) & 1.27(c)).	4.		Informa	Copy of IDS and PTO-1449 (pages)					
Claiming Small Entity As Independent Inventor (37 C.F.R. §§1.9(f) & 1.27(b)). Claiming Small Entity As Small Business Concern (37 C.F.R. §§1.9(f) & 1.27(c)).	5.		Assign	Recordation Form Cover Sheet (PTO-1595)					
	6.		Statem						

FIRST-NAMED INVENTOR OR APPLICATION IDENTIFIER:

Request for New Nonprovisional Application (37 C.F.R. §1.53(b))

7. Fee Calculation

CLAIMS AS FILED									
Claims	Number Filed	Basic Fee Allowance	Number Extra	Rate	Basic Fee 37 C.F.R. 1.16(a) \$690.00				
Total Claims (37 C.F.R. 1.16(c))	35	- 20 =	15	\$ 18.00	270.00				
Independent Claims (37 C.F.R. 1.16(b))	3	- 3 =	0	\$78.00	0				
Multiple Dependent Claim(s), if any (37 C.F.R. 1.16(d))				\$260.00	0				
			SUBTOTAL:		960.00				
Reduction by 50% for filing by small entity: TOTAL FEE:				- \$480.00					
				FEE:	\$480.00				

- 8. A check in the amount of \$480.00 is enclosed.
- 9. The Commissioner is hereby authorized to credit overpayments or charge the following fees to Deposit Account No. 50-0311, Ref. No. 18519-001:
- 10. Return Receipt Postcard Enclosed.

Dated: February 18, 2000

Respectfully submitted

David E. Johnson, Reg. No. 41,874 Ivor R. Elrifi, Reg. No. 39,529

Attorney(s) for Applicants

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